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Leg pain in a hunter: Not the usual compartment syndrome case

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Abstract

This is a 44-year-old hunter who was helping friends push around a deer that they had killed a day prior to admission. He stated that he was doing this while on uneven ground. He developed a severe, burning pain in his legs, paresthesia on the dorsum of the left foot, and swelling over the anterolateral aspect of his left leg. The pain became so unbearable that he presented to the emergency room (ER). Orthopedic Surgery was consulted. Initially, it was felt that the history and physical exam was not consistent with compartment syndrome. On exam, there was tenseness over the lateral compartment of his left leg, over the peroneus longus and brevis. He had decreased sensation to light touch over the dorsum of his left foot and along the superficial peroneal nerve distribution. He had 4+/5 strength on resisted left ankle dorsiflexion. Anterior compartment pressure testing done after all other imaging tests came back normal showed elevated findings. Assessment was combined rhabdomyolysis and left leg compartment syndrome. The patient underwent left leg fasciotomy, with 4 compartment release. On first post-operative day rounding, his pain had vastly diminished. Intravenous fluids were continued as, initially, his CPK continued to go up. On the ensuing days, his leg continued to improve, and he was discharged home on the fourth day. Six weeks status post release, he had returned to work already and denied having any new complaints. He was encouraged to follow up as needed.

Biography: Sourav Das completed his MD at the American University of Antigua, where he graduated cum laude and had received clerkship honors in Family Medicine, Internal Medicine, OB/GYN, Pediatrics, Psychiatry, and Surgery.He is currently a first year Family Medicine resident at the Penn State Milton S. Hershey Medical Center. Prior to residency he was a research assistant at the Rubin Institute of Advanced Orthopaedics, where he compiled a data bank of hip arthroplasty procedures at Sinai Hospital in order to perform a retrospective study comparing co-morbidities, demographics, mechanical implantation, Harris Hip Scores, UCLA activity scores, and flexion contracture angles